

<b>SMALL BUSINESS</b>	
<b>Applicant or Patentee:</b> Furchheim and Le Thien	<b>Docket #:</b>
<b>Serial or Patent Number:</b>	<b>Examiner:</b>
<b>Filed or Issued:</b>	<b>Art Unit:</b>
<b>For: Method for Producing a Camshaft and Camshaft Produced According to Said Method</b>	

**VERIFIED STATEMENT (DECLARATION) BY A SMALL BUSINESS CONCERN CLAIMING SMALL ENTITY STATUS UNDER 37 C.F.R. §§ 1.9(F) AND 1.27(C)**

I hereby declare that I am

- ☐ the owner of the small business concern identified below:  
☒ an official of the small business concern empowered to act on behalf of the concern identified below:

**Name of Concern:** SE Sächsische Elektronenstrahl GmbH  
**Address:** Otto-Schmerbach-Strasse 21a, D-09117 Chemnitz / Germany

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the matter described in:

- ☒ The specification filed herewith, with the title as listed above.  
☐ The patent application identified above.  
☐ The PCT International patent application identified above.  
☐ The patent number identified above.

If the rights held by the above identified small business concern are not exclusive, each individual, concern or organization having rights to the invention must file separate verified statements averring to their status as small entities, and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention, or by any concern who would not qualify as a small business concern under 37 CFR 1.9(d), or a nonprofit organization under 37 CFR 1.9(e). Each person or organization having any rights in the invention is listed below:

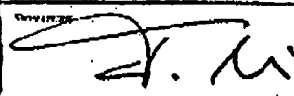
- ☒ No such person, concern or organization.  
☐ Each such person, concern or organization as listed below:

<b>Full Name</b>	<input type="checkbox"/> Individual
<b>Address</b>	<input type="checkbox"/> Small Business Concern
	<input type="checkbox"/> Nonprofit Organization

☐ See attached sheet for additional person(s), concern(s) or organization(s).

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate (37 CFR 1.28(b)).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine, or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which the verified statement is directed.

<b>Name and Title</b> SE Sächsische Elektronenstrahl GmbH	<b>Date</b> 18.12.2000
<b>Address</b> Otto-Schmerbach-Strasse 21a D-09117 Chemnitz / Germany	<b>Signature</b> 

Please type a plus sign (+) inside this box → ☒

PTO/SB/01 (12-97)  
Approved for use through 9/30/00. OMB 0851-0032  
Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b> (37 CFR 1.63)	<b>Attorney Docket Number</b>	7054-101XX
	<b>First Named Inventor</b>	Bodo Furchheim
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	
	<b>Filing Date</b>	November 2, 2000
	<b>Group Art Unit</b>	
<input type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required).
<b>Examiner Name</b>		

As a below named inventor, I hereby declare

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD FOR PRODUCING A CAMSHAFT AND CAMSHAFT PRODUCED ACCORDING TO SAID METHOD**

the specification of which

(Title of the invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

November 2, 2000

as United States Application Number or PCT International

Application Number \_\_\_\_\_ and was amended on (MM/DD/YYYY) \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(e) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
PCT/DE00/00536	PCT	February 23, 2000	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 2)

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:

Please type a plus sign (+) inside this box ☒

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Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

## DECLARATION—Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U. S. Parent Application or PCT Parent  
Number

Parent Filing Date  
(MM/DD/YYYY)

Parent Patent Number  
(if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer  
Number Bar Code  
Label here

Name	Registration Number	Name	Registration Number
Robert Berliner	20,121	M. John Carson	25,090
Billy A. Robbins	18,313	Margaret A. Churchill	39,944
John M. May	26,200	Terri L. Sale	45,066
Abraham N. Seidman	41,300		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to:

☐ Customer Number or  
Bar Code Label

OR ☒ Correspondence address below

Name	Robert Berliner, Esq.				
Address	FULBRIGHT & JAWORSKI L.L.P.				
Address	865 South Figueroa Street, 29th Floor				
City	Los Angeles	State	CA	ZIP	90017
Country	USA	Telephone	(213) 892-9200	Fax	(213) 680-4518

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Family Name or Surname

Bodo

FURCHHEIM

Inventor's  
Signature

Bodo F. Li

Date

12.12.00

Residence: City

Chemnitz

State

Country

DE

Citizenship

DE

Post Office Address

Otto-Thörner-Strasse 53

Post Office Address

D-09127

City

Chemnitz

State

ZIP

Country

DE

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

Please type a plus sign (+) inside this box → ☒

PTO/SB/02A (2-97)  
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Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE  
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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet Page <u>1</u> of <u>1</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Hoang				LE THIEN			
Inventor's Signature	<i>Le Thien</i> <b>Hoang Le Thien</b>					Date	18.12.00
Residence: City	Limbach-Oberfrohna	State		Country	DE	Citizenship	DE
Post Office Address		Weststrasse 70					
Post Office Address		D-09212					
City	Limbach-Oberfrohna	State		ZIP		Country	DE
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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SCANNED, # 20

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- ☒ No such person, concern or organization.  
☐ Each such person, concern or organization as listed below:

<b>Full Name</b>	<input type="checkbox"/> Individual
<b>Address</b>	<input type="checkbox"/> Small Business Concern
	<input type="checkbox"/> Nonprofit Organization

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<b>Name and Title</b> SE Sächsische Elektronenstrahl GmbH	<b>Date</b> 18.12.2000
<b>Address</b> Otto-Schmerbach-Strasse 21a D-09117 Chemnitz / Germany	<b>Signature</b> 